

APPLICATION TO CONVERT A PROVISIONAL TEACHING CERTIFICATE

ARIZONA DEPARTMENT OF EDUCATION – CERTIFICATION UNIT

Mailing Address: P.O. Box 6490, Phoenix, AZ 85005-6490 • Telephone: (602) 542-4367

GENERAL INFORMATION:

This form is used to convert a Provisional Arts Education, Early Childhood, Elementary, Secondary, or Special Education teaching certificate to a Standard teaching certificate.

Use this form if you meet all of the following criteria:

- ☐ You hold an Arizona **Provisional Arts Education, Provisional Early Childhood, Provisional Elementary, Provisional Secondary, or Provisional Special Education** teaching certificate which has been valid for a minimum of two years.
- ☐ You have completed two years of full-time teaching during the valid term of your Arizona Provisional teaching certificate.
- ☐ You have satisfied all allowable deficiency requirements.

Please see page 4 of if you do not meet the above criteria.

INSTRUCTIONS

Submit the following documents:

Checklist

- ☐ A Completed Application to Convert a Provisional Teaching Certificate.
 - ☐ A Superintendent or Personnel Officer must complete “Verification of Teaching Experience” to verify four semesters or two years of full-time teaching experience during the valid term of the Provisional certificate.
 - ☐ Answer **every** Background Question, sign and date the application.
 - ☐ If you answer “Yes” to any Background questions, submit a completed [Explanation of Incident form](#) for **every** incident, even if the incident was previously disclosed.
- ☐ A photocopy of your valid Arizona Department of Public Safety Identity Verified Prints (AZDPS IVP) fingerprint card.
- ☐ If you are applying for the full SEI endorsement, submit a copy of the SEI training certificate or an official transcript showing the approved SEI course.
- ☐ If you have an Arizona and/or US constitution deficiency, submit an official transcript OR exam score report documenting completion of the AZ and/or US constitution requirements.
- ☐ For Elementary Certificates Only: If your Provisional Elementary certificate has a Phonics deficiency, submit verification of 45 clock hours or three semester hours of instruction in research-based systematic phonics. Please submit a letter from the school district or provider verifying 45 clock hours of training or an official transcript to verify semester hours.
- ☐ Check or money order for the amount due, made payable to the Arizona Department of Education (**ADE**). Cash will not be accepted. Fees are: \$30 per Provisional Teaching certificate to be converted, \$60 to add the SEI endorsement, and \$20 to remove the AZ and US constitution deficiencies. **Please note:** Certification fees will not be refunded even if you do not qualify for the requested service.

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SECTION 1: PERSONAL INFORMATION (TYPE OR PRINT IN BLUE OR BLACK INK)

Social Security Number: _____ **Date of Birth:** ____/____/____ **Gender:** M / F
(For identification purposes only)

Full Legal Name: _____
Last First Middle

Mailing Address: _____
Street Number or P.O. Box City State Zip

Telephone: (____) _____ **Email Address:** _____

Ethnicity: _____ American Indian or Alaskan Native _____ Black or African-American (Not-Hispanic) _____ White (Not-Hispanic)
(Gender and Ethnicity are requested for federal reporting purposes only) _____ Asian or Pacific Islander _____ Hispanic or Latino _____ Other

SECTION 2: CERTIFICATION TYPE AND SERVICE FEES

If you are applying to add the SEI Endorsement check here: ____ SEI endorsement (\$60)

If you are removing the AZ and/or US Constitution check the deficiencies you are removing below (\$20)

____ US Constitution Deficiency ____ AZ Constitution Deficiency

I would like to convert the following Provisional Certificate(s) to a Standard certificate(s) (\$30 each):

____ Arts Education, PreK-12 (\$30) ____ Early Childhood (\$30) ____ Elementary (\$30)
____ Secondary (\$30) ____ Spec Ed Cross-Categorical (\$30) ____ Spec Ed Early Childhood (\$30)
____ Spec Ed Emotional Disability (\$30) ____ Spec Ed Hearing Impaired (\$30) ____ Spec Ed Intellectual Disability (\$30)
____ Spec Ed Learning Disability (\$30) ____ Spec Ed Visually Impaired (\$30) ____ Spec Ed Severe and Profound (\$30)

SECTION 3: VERIFICATION OF TEACHING EXPERIENCE

This section must be completed by a District Superintendent or Personnel Officer.

FOR DISTRICT USE ONLY

This applicant has met the teaching requirements for the conversion of the following certificate(s):

____ Provisional Arts Education, PreK-12 ____ Provisional Elementary ____ Provisional Special Education
____ Provisional Early Childhood ____ Provisional Secondary ____ Provisional PreK-12 Physical Education

VERIFIED TEACHING EMPLOYMENT:

I verify that this applicant has: ____ Four Semesters OR ____ Two (2) years of full-time teaching experience during the valid term of the Provisional certificate(s).

Signature of Superintendent/Personnel Officer **Date**

Title **Name of School or District**

SECTION 4: BACKGROUND QUESTIONS - ANSWER EVERY QUESTION, SIGN AND DATE

** REQUIREMENTS MAY BE SUBJECT TO CHANGE AND ARE FULLY REFERENCED IN THE ARIZONA REVISED STATUTES AND ADMINISTRATIVE CODE. **

CERTIFICATION FEES WILL NOT BE REFUNDED.

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ATTENTION: If “YES” is indicated for any of the following questions, please attach a full explanation to this application for all incidents. A statement must be provided with each application.

1. **YES**__ **NO**__ Have you ever had any professional certificate or license revoked, surrendered or suspended?
2. **YES**__ **NO**__ Have you ever received a reprimand or other disciplinary action involving any professional certification or license?
3. **YES**__ **NO**__ Have you ever been convicted of any felony offense?
4. **YES**__ **NO**__ **Have you ever been arrested for any offense for which you were fingerprinted?**
5. **Have you ever been arrested for any of the following offenses in this state or similar offenses in another jurisdiction?**

YES__ **NO**__ a Second-degree murder

YES__ **NO**__ b Aggravated assault resulting in serious physical injury or involving the discharge, use or threatening exhibition of a deadly weapon or dangerous instrument against a minor under fifteen years of age

YES__ **NO**__ c Sexual assault

YES__ **NO**__ d Molestation of a child

YES__ **NO**__ e Sexual conduct with a minor

YES__ **NO**__ f Commercial sexual exploitation of a minor

YES__ **NO**__ g Sexual exploitation of a minor

YES__ **NO**__ h Child abuse

YES__ **NO**__ i Kidnapping

YES__ **NO**__ j Sexual abuse of a minor

YES__ **NO**__ k Taking a child for the purpose of prostitution as prescribed in section 13-3206

YES__ **NO**__ l Child prostitution as prescribed in section 13-3212

YES__ **NO**__ m Involving or using minors in drug offenses

YES__ **NO**__ n Continuous sexual abuse of a child

YES__ **NO**__ o Attempted first-degree murder

YES__ **NO**__ p Any other dangerous crime against children as defined in section 13-604.01

YES__ **NO**__ q Any of the above listed offenses if committed as a reparatory offense as described in section 13-1001

YES__ **NO**__ r Any offense causing you to register as a sex offender

YES__ **NO**__ s First-degree murder

YES__ **NO**__ t Armed Robbery

YES__ **NO**__ u Incest

YES__ **NO**__ v Exploitation of minors involving drug offenses

YES__ **NO**__ w Sexual abuse of a vulnerable adult

YES__ **NO**__ x Sexual exploitation of a vulnerable adult

YES__ **NO**__ y Commercial sexual exploitation of a vulnerable adult

YES__ **NO**__ z Abuse of a vulnerable adult

YES__ **NO**__ aa Molestation of a vulnerable adult

YES__ **NO**__ bb Neglect of a vulnerable adult

I UNDERSTAND THAT PURSUANT TO ARS § 15-534, ANY PERSON WHO MAKES A FALSE STATEMENT, REPRESENTATION OR CERTIFICATION IN ANY APPLICATION FOR CERTIFICATION IS GUILTY OF A MISDEMEANOR OFFENSE. I SWEAR OR AFFIRM THAT THE FOREGOING INFORMATION COMPLETED BY ME, OR SUBMITTED BY ME FOR CERTIFICATION PURPOSES IS, TO THE BEST OF MY KNOWLEDGE, TRUE AND CORRECT. FURTHERMORE, SHOULD ANY PART OR ALL OF THE INFORMATION HEREIN PROVIDED PROVE TO BE FALSE, I RECOGNIZE THAT IT SHALL BE JUST CAUSE FOR REVOCATION, SUSPENSION, OR OTHER DISCIPLINARY ACTION AGAINST ANY CERTIFICATE ISSUED TO ME BY THE ARIZONA DEPARTMENT OF EDUCATION.

Applicant's Signature

Date

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Not using the correct application?

If you hold a Provisional Elementary, Secondary, Special Education, Arts Education, and Early Childhood Certificate and you do not have the required teaching experience to convert:

- Use the [Application for One-Time Extension](#) if you hold an Arizona Provisional Arts Education, Early Childhood, Elementary, Secondary, or Special Education certificate if you have **not** taught full-time for two years during the valid term of your 3-year Provisional certificate.

If you hold a Reciprocal Provisional Teaching certificate:

- Use the [Application to Convert a Reciprocal Teaching Certificate](#) if you have taught full time for two years during the valid term of your 3-year Reciprocal teaching certificate.
- Use the [Application for Certification](#) to apply for a Provisional teaching certificate if you **have not** taught full time for two years during the valid term of your Reciprocal teaching certificate.

If you hold a Provisional Career and Technical Education (CTE) certificate:

- Use the [Application to Extend a Provisional CTE certificate](#) if you meet all of the requirements to extend but you do not meet all requirements for the Standard CTE certificate.
- Use the [Application to Convert a Provisional CTE](#) certificate if you meet all of the requirements for a Standard CTE certificate.

If you hold a Provisional Adult Education certificate:

- Use the [Application to Convert a Provisional Adult Education](#) certificate.